



2012 Preferred Products List Wall Chart

Effective September 1, 2012



This Preferred Products List Wall Chart is a list of prescription drugs preferred by your health plan for their safety, effectiveness and cost. Drugs are listed by common categories or class. **This is a partial listing. Not all products on this list may be covered by your pharmacy benefit plan.** Your plan's guidelines for quantity limits, step therapy, prior authorization and use of generic drugs apply.

If you have questions about a drug status, or you are considering a medication not on this list, please call customer service, 24 hours a day, 7 days a week. Or visit www.optum.com.

Changes to the Preferred Products List

This drug list may change without notice. Our review committee of independent doctors and pharmacists meets regularly to decide which new and current prescription drugs should be on the list. Their decisions are based on a drug's safety, how well it works and cost.

For the most up-to-date list, call customer service at the number on the back of your ID card.

Using the Preferred Products List

This list will help you and your doctor choose the most cost-effective prescription drugs. The quick guide tells you if a medication is generic or preferred brand, and if special rules apply. Bring this list with you when you see your doctor.

Generics

Generic drugs are FDA approved, offer the best value and are almost always on the list. They are as safe and effective as their brand-name counterparts. The most common generic drugs are listed in each class. Preferred brands are also listed.

Prior Authorization

- The Prior Authorization staff is available for non-preferred medication requests 6 a.m. – 6 p.m., PT, Monday – Friday.

Pharmacy Prior Authorization

- Phone: **1-800-711-4555**, Option 1
- Fax: 1-800-527-0531
- Electronically: **www.optumrx.com**
(The request form is located in the Health Care Professionals section under the Providers column)

Specialty Drug Prior Authorization

- Phone: **1-800-711-4555**, Option 2
- Fax: 1-800-853-3844
- Electronically: **www.optumrx.com**
(The request form is located in the Health Care Professionals section under the Providers column)

Physicians and Pharmacists:
Please refer to this list when prescribing/dispensing medications.
All strengths and formulations of the medications listed in this document are considered preferred unless noted. Due to the constantly changing nature of drug therapy, this list is subject to change without notice.

Brand name drugs are listed in ALL CAPS.
Generic drugs are listed in lowercase.

Legend

- E = Limitations may apply in the form of an electronic step edit or electronic prior authorization
- G* = Covered as a generic if plan participates in the Brands For Generic program
- PA = Prior authorization may be required
- QL = Quantity Limits may apply
- ST = Step Therapy (Rx InStep Program) may be required
- SP = Available through the Specialty Pharmacy Program. Copay and quantity determined by the plan's benefit design.

ANT-INFECTIVE AGENTS

ANTHELMINTICS

mebendazole BILTRICIDE

ANTIBACTERIALS

1st Generation Cephalosporins

cefadroxil cephalexin

2nd Generation Cephalosporins

cefaclor cefuroxime axetil
cefprozil

3rd Generation Cephalosporins

cefdinir cefpodoxime proxetil

Macrolides

azithromycin erythromycin stearate
clarithromycin, ER tab ERY-TAB
erythromycin ethylsuccinate

Penicillins

amoxicillin dicloxacillin
amoxicillin/ clavulanate K penicillin VK
ampicillin

Quinolones

ciprofloxacin tab, ER tab ofloxacin
levofloxacin AVELOX, ABC

Sulfonamides and Combinations

erythromycin/ sulfisoxazole sulfamethoxazole/ trimethoprim

Tetracyclines

demeclocycline minocycline
doxycycline hydrate QL tetracycline
doxycycline monohydrate QL

Miscellaneous Antibacterials

clindamycin trimethoprim
metronidazole tinidazole
neomycin vancomycin
nitrofurantoin, w/macrocrystalline, w/monohydrate macrocrystalline

ANTIFUNGALS		ANTINEOPLASTIC AND IMMUNOSUPPRESSANT AGENTS		Fibric Acid Derivatives	
clotrimazole troche fluconazole, 150mg tab QL griseofulvin microsize itraconazole cap PA flucytosine ketoconazole	nystatin terbinafine tab voriconazole GRIFULVIN V GRIS-PEG	ANTINEOPLASTICS *SP		fenoferic acid fenofibrate, w/micronized gemfibrozil ANTARA	LIPOFEN TRICOR TRILIPIX
ANTIMYCOBACTERIALS					
ethambutol isoniazid pyrazinamide	rifampin DAPSONE MYCOPUTIN	anastrozole bicalutamide cyclophosphamide etoposide exemestane fluorouracil flutamide hydroxyurea letrozole PA leucovorin megestrol mercaptopurine methotrexate tamoxifen citrate ALKERAN CARAC CEENU	EMCYT FARESTON GLEEVEC PA, QL HEXALEN LEUKERAN LUPRON DEPOT 7.5 mg, 22.5 mg, 30 mg, 45 mg SP LYSODREN MATULANE MYLERAN NEXAVAR PA, QL NILANDRON TABLOID TARGRETIN cap PA TEMODAR TREXALL TYKERB PA, QL XELODA	HMG-CoA Reductase Inhibitors	
ANTIPROTOZOALS		Miscellaneous Antiprotozoals		atorvastatin fluvastatin lovastatin	pravastatin simvastatin, 80 mg PA CRESTOR
<i>Antimalarials</i>		atovaquone/proguanil metronidazole		Miscellaneous Antihyperlipidemics and Combinations	
chloroquine phosphate hydroxychloroquine mefloquine		quinine sulfate cap PA DARAPRIM PRIMAQUINE	amlodipine/atorvastatin ADVICOR LOVAZA		NIASPAN SIMCOR E VYTORIN, 10 mg/80 mg PA
Miscellaneous Antiprotozoals					
ANTIVIRALS *SP		ANTIHYPERTENSIVES		ACE Inhibitors	
*SP: Agents in HIV categories may be subject to Specialty Pharmacy requirements as determined by the plan's benefit design.		benazepril, w/HCTZ captopril, w/HCTZ enalapril, w/HCTZ fosinopril, w/HCTZ lisinopril, w/HCTZ		moexipril, w/HCTZ quinapril, w/HCTZ perindopril ramipril trandolapril	
Hepatitis Agents		Alpha Blockers		doxazosin prazosin	
ribavirin PA BARACLUDÉ EPIVIR-HBV HEPSERA		INCIVEK PA INFERGEN PA, QL, SP PEGASYS, PROCLICK PA, QL, SP	terazosin		Angiotensin II Receptor Blockers
HIV Combination		azathioprine cyclosporine mycophenolate mofetil		eprosartan losartan potassium, w/HCTZ irbesartan , w/HCTZ	
ATRIPLA		COMPLERA	Beta Blockers		CARDIOVASCULAR AGENTS
HIV Protease Inhibitors		azathioprine cyclosporine mycophenolate mofetil		acebutolol atenolol, w/chlorthalidone betaxolol bisoprolol, w/HCTZ carvedilol (not CR) labetalol metoprolol succinate SR metoprolol tartrate, w/HCTZ	
APTVUS CRIXIVAN INVIRASE KALETRA LEXIVA		NORVIR PREZISTA REYATAZ VIRACEPT	ANTIANGINALS (NITRATES)		Calcium Channel Blockers
HIV NNRTI		isosorbide dinitrate, CR tab isosorbide mononitrate, ER tab nitroglycerin DILATRATE SR		ISORDIL 40 mg tab NITRO-BID oint NITRO-DUR 0.3 mg/hr, 0.8 mg/hr NITROSTAT RANEXA E	
HIV NRTI		ANTIARRHYTHMICS		Dihydropyridines	
didanosine DR lamivudine tab lamivudine/zidovudine stavudine zidovudine EMTRIVA EPZICOM		EPIVIR soln TRIZIVIR TRUVADA VIDEX VIREAD ZIAGEN	amiodarone digoxin disopyramide flecainide mexiletine propafenone	amlodipine felodipine isradipine (not CR) nicardipine nifedipine, ER tab	
Miscellaneous Antivirals		nevirapine EDURANT INTELENCE		nimodipine nisoldipine ER AZOR EXFORGE, w/HCTZ TRIBENZOR	
acyclovir amantadine famciclovir ganciclovir ribavirin PA		RESCRIPTOR SUSTIVA VIRAMUNE XR	Non-dihydropyridines		Central Alpha Agonists
ANTICOAGULANTS AND BLOOD MODIFIERS		rimantadine valacyclovir ISENTRESS SELZENTRY VIREAD		diltiazem, ER/SR cap amlodipine/benzapril trandolapril/verapamil	
anagrelide cilostazol clopidogrel 75 mg dipyridamole enoxaparin inj SP fondaparinux inj SP pentoxifylline CR		ticlopidine warfarin AGGRENOX EFFIENT FRAGMIN SP PRADAXA PA XARELTO PA	Miscellaneous Calcium Channel Blockers		Direct Vasodilators
ANTIHYPERLIPIDEMICS		Bile Acid Sequestrants		verapamil, ER tab/ SR cap TARKA	
cholestyramine, light colestipol		WELCHOL		hydralazine	
Antihyperlipidemics		minoxidil			

<p>Diuretics</p> <p>amiloride, w/HCTZ bumetanide chlorthalidone furosemide hydrochlorothiazide indapamide</p> <p>Miscellaneous Antihypertensives and Combinations</p> <p>nadolol/bend TEKTURN^E, w/HCTZ^E</p> <p>Miscellaneous Vasodilators</p> <p>papaverine CR DIBENZYLINE</p> <p>PULMONARY ARTERIAL HYPERTENSION (PAH) AGENTS</p> <p>LETAIRIS^{PA} TRACLEER^{PA} REVATIO TAB^{PA}</p> <p>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS</p> <p>eplerenone</p>	<p>Miscellaneous Non-Narcotic Analgesics Combinations</p> <p>butalbital/APAP phenyltoloxamine/APAP, w/salicylamide</p> <p>ANTIALZHEIMERS</p> <p>donepezil, ODT rivastigmine tartrate galantamine ARICEPT 23 mg^E hydrobromide, ER cap</p> <p>NMDA Receptor Antagonists</p> <p>NAMENDA^{QL}</p> <p>ANTICONVULSANTS</p> <p>carbamazepine phenytoin clonazepam, ODT primidone diazepam gel^{QL} topiramate divalproex, ER tab valproic acid ethosuximide zonisamide felbamate DILANTIN gabapentin LAMICTAL, Kit^{QI}, ODT, XR tab lamotrigine LYRICA levitiracetam, ER TEGRETOL XR 100 mg oxcarbazepine phenobarital</p> <p>ANTIDEPRESSANTS</p> <p>phenelzine tranylcypromine</p> <p>MAO Inhibitors</p> <p>citalopram paroxetine, SR escitalopram sertraline fluoxetine, 90 mg DR^{QL}</p> <p>Tricyclics and Other Norepinephrine Reuptake Inhibitors</p> <p>amitriptyline, w/perphenazine imipramine, PM cap amoxapine maprotiline clomipramine nortriptyline desipramine protriptyline doxepin trimipramine</p> <p>Miscellaneous Antidepressants</p> <p>bupropion, ER/SR tab trazodone mirtazapine, ODT venlafaxine, ER nefazodone CYMBALTA olanzapine/fluoxetine PRISTIQ</p> <p>ANTIMANIAS</p> <p>carbamazepine, SR tab lithium citrate soln (not SR cap) olanzapine, ODT divalproex risperidone, ODT lithium carbonate, CR tab TEGRETOL XR 100 mg</p> <p>ANTIPARKINSONS</p> <p>amantadine pramipexole benzotropine ropinirole, ER bromocriptine selegiline carbidopa/levodopa, CR trihexyphenidyl carb/levo/entacapone COMTAN</p> <p>ANTIPSYCHOTICS</p> <p>clozapine ziprasidone^E olanzapine, ODT ABILIFY, DISCMELT quetiapine fumarate SAPHRIS risperidone, ODT SEROQUEL XR</p>	<p>Typical</p> <p>chlorpromazine perphenazine fluphenazine thioridazine haloperidol thiobixene loxapine trifluoperazine</p> <p>ANXIOLYTICS, SEDATIVES AND HYPNOTICS</p> <p>phenobarbital</p> <p>Barbiturates</p> <p>phenobarbital</p> <p>Benzodiazepines</p> <p>alprazolam lorazepam chlordiazepoxide midazolam syrup clorazepate oxazepam diazepam temazepam flurazepam triazolam</p> <p>Miscellaneous Anxiolytics, Sedatives, and Hypnotics</p> <p>buspirone zolpidem, SR tab chloral hydrate syrup^{PA} LUNESTA zaleplon</p> <p>CNS STIMULANTS</p> <p>amphetamine/ methylphenidate, SR dextroamphetamine modafinil^{PA} dexmethylphenidate AMPHETAMINE ER CAP dextroamphetamine Vyvanse methamphetamine</p> <p>MUSCLE RELAXANTS</p> <p>baclofen metaxalone carisoprodol methocarbamol cyclobenzaprine orphenadrine, w/ASA/caffeine dantrolene diazepam tizanidine</p> <p>MISCELLANEOUS CNS</p> <p>naltrexone MESTINON syrup, CR tab pyridostigmine bromide</p> <p>DERMATOLOGIC AGENTS</p> <p>ACNE TREATMENTS *QL</p> <p>*QL: Agents in this category may be subject to Quantity Limits</p> <p>adapalene cream, 0.1% gel claravis^{PA} isotretinoin^{PA} amnesteem^{PA} myorisan^{PA} benzoyl peroxide/ clindamycin sorbet^{PA} benzoyl peroxide/ erythromycin tretinoin RETIN-A MICRO</p> <p>ANTI-INFECTIVES</p> <p>Antibacterials</p> <p>clindamycin sulfacetamide^{QL} erythromycin sulfacetamide/ gentamicin sulfur lotion^{QL} metronidazole BACTROBAN cream mupirocin FINACEA^{QL}, PLUS kit^{QL} silver sulfadiazine METROGEL 1%</p> <p>Antifungals</p> <p>ciclopirox olamine iodquinol-HC ketoconazole clotrimazole/ betamethasone nystatin, w/triamcinolone econazole selenium sulfide</p> <p>Antiparasitics</p> <p>permethrin EURAX malathion</p>	<p>Antipsoratics</p> <p>calcitriol calcipotriene DRITHO-CRÈME HP ELIDEL^{PA, QL}</p> <p>Antivirals</p> <p>ZOVIRAX</p> <p>ANTI-INFLAMMATORIES</p> <p>alclometasone fluticasone aminonide fluocinolone acetonide betamethasone fluocinonide dipropionate, w/augmented halobetasol hydrocortisone 2.5% betamethasone valerate hydrocortisone butyrate clobetasol mometasone furoate desonide prednicarbate triamcinolone acetate desoximetasone</p> <p>MISCELLANEOUS DERMATOLOGICS</p> <p>aluminum chloride trypsin/castor oil/ ammonium lactate peruvian balsam spray imiquimod^{QL} urea 40%, 45% lotion lidocaine, w/prilocaine urea 50% susp naproderm CONDYLOX gel podofilox prudoxin silver nitrate/ potassium nitrate silver nitrate soln OXSORALEN-ULTRA^{PA} PROTOPIC^{PA, QL}</p> <p>GASTROINTESTINAL AGENTS</p> <p>ANTIEMETICS</p> <p>dronabinol^{PA} prochlorperazine granisetron^{QL} promethazine ondansetron^{QL}, ODT^{QL} trimethobenzamide</p> <p>ANTI-INFLAMMATORIES</p> <p>balsalazide sulfasalazine, SR tab budesonide SR ANALPRAM HC lotion hydrocortisone cream, enema, sup APRISO ASACOL (not HD) hydrocortisone acetate, w/pramoxine CANASA mesalamine PROCTOFOAM-HC</p> <p>ANTISPASMODIC AND GI MOTILITY</p> <p>dicyclomine phenobarbital/ diphenoxylate/astropine belladonna alkaloids hyoscymine DONNATL EXTENTABS metoclopramide^{QL} SAL-TROPINE</p> <p>DIGESTANTS</p> <p>pancrelipase ZENPEP CREON</p> <p>GALLSTONE SOLUBILIZING</p> <p>ursodiol</p> <p>ULCER TREATMENT AND PREVENTION</p> <p>Histamine H2-antagonists</p> <p>cimetidine (not 200 mg) nizatidine famotidine (not 20 mg) ranitidine (not 150 mg)</p> <p>Prostaglandins</p> <p>misoprostol</p> <p>Protectants</p> <p>sucralfate</p>

*QL : All agents in this category may be subject to Quantity Limits

APAP/codeine butorphanol nasal soln fentanyl patch fentanyl oral transmucosal hydrocodone/APAP hydrocodone/IBU hydromorphone levorphanol meperidine, w/promethazine

<i>Proton-pump Inhibitors</i>		<i>Sulfonylureas</i>	<i>GROWTH HORMONES</i>	<i>MOUTH AND THROAT</i>				
lansoprazole omeprazole DR pantoprazole EC	DEXALANT NEXIUM	chlorpropamide glimepiride glipizide, w/metformin, ER tab	glyburide, w/metformin, w/micronized tolazamide tolbutamide	Coverage may vary by plan NUTROPIN / AQ PA, SP SAIZEN PA, SP	chlorhexidine gluconate lidocaine viscous			
<i>Miscellaneous Ulcer Treatments and Combinations</i>		<i>Thiazolidinediones</i>		TEV-TROPIN PA, SP				
HELDAC QL	PYLERA QL	pioglitazone	ACTOS					
<i>MISCELLANEOUS GASTROINTESTINALS</i>		<i>Miscellaneous Antidiabetics and Combinations</i>		<i>MULTIPLE SCLEROSIS</i>				
lactulose glycopyrrolate methscopalamine PEG-3350/electrolytes QL	PEG-3350/NACL/NA bicarbonate/KCL QL AMITIZA E	acarbose pioglitza/met ACTOPLUS MET (not XR) BYETTA QL, ST	JANUVIA JENTADUETO KOMBIGLYZE ONGLYZA PRANDIMET DUETACT JANUMET, XR tab	alendronate QL (not Plus D) calcitonin nasal spray QL etidronate	ibandronate tab QL ACTONEL QL EVISTA			
<i>GENITOURINARY AGENTS</i>		<i>ANTIGOUT PRODUCTS</i>		<i>RHEUMATOID ARTHRITIS</i>				
cytra-2, -3, -K potassium citrate CR	tricitrates	allopurinol colchicine Indomethacin	probenecid ULORIC	leflunomide CUPRIMINE				
<i>ANTIBACTERIALS (VAGINAL)</i>		<i>CONTRACEPTIVES</i>		<i>SMOKING CESSATION</i>				
clindamycin phosphate metronidazole	terconazole QL CLEOCIN supp	Coverage may vary by plan.	altavera amethia, lo apri aranelle aviare azurette balziva briellyn camila camrese, lo caziant cesia cryselle emoquette enpresse errin gianvi gildess FE introvale jolessa jolivette junel, -FE kariva kelnor leena lessina levora loryna low-ogestrel lutera	microgestin, -FE mononessa necon nora-be nortrel ogestrel ocella tilia fe philith portia previfem quasense recilipsen solia sprincte sronyx tilia fe tri-legest tri-previfem tri-sprincte trinessa trivora velivet zarah zenchent zeosa zovia BEYAZ NATAZIA NUVARING SAFYRAL	progesterone cap norethindrone	medroxyprogesterone norethindrone	ibandronate tab QL ACTONEL QL EVISTA	Coverage may vary by plan bupropion SR CHANTIX
<i>ANTI-INFECTIVES</i>		<i>THYROID LOWERING</i>		<i>SUBSTANCE ABUSE PRODUCTS</i>				
methenamine/ hyoscamine/ methylene blue combination	methenamine mandelate phenazopyridine/ butabarbital/ hyoscamine	methimazole	propylthiouracil	buprenorphine sub PA, QL disulfiram	pentazocine/naloxone SUBOXONE film PA, QL			
<i>ERECTILE DYSFUNCTION PRODUCTS</i>		<i>THYROID REPLACEMENTS</i>		<i>TNF ANTAGONISTS</i>				
Coverage may vary by plan		levothyroxine levoxyl liothyronine	unithroid SYNTHROID	CIMZIA PA, QL, SP ENBREL PA, QL, SP HUMIRA PA, QL, SP	REMICADE PA, SP SIMPONI PA, QL, SP			
<i>MISCELLANEOUS GENITOURINARY PRODUCTS</i>		<i>MISCELLANEOUS ENDOCRINE PRODUCTS</i>		<i>VISCOSUPPLEMENTS</i>				
alfuzosin bethanechol doxazosin finasteride oxybutynin, ER phenazopyridine prazosin tamsulosin terazosin tolterodine	trosium AVODART ELMIRON ENABLEX GELNIQUE QL JALYN OXYTROL QL RAPAFLO VESICARE	bromocriptine cabergoline calcitriol	desmopressin acetate SYNAREL ZEMPLAR	EUFLEXXA PA, SP ORTHOVISC PA, SP	SYNVISC PA, SP SYNVISC ONE PA, SP			
<i>HORMONES/METABOLIC AND ENDOCRINE AGENTS</i>		<i>MISCELLANEOUS OBSTETRICS/ GYNECOLOGICAL PRODUCTS</i>		<i>MISCELLANEOUS RENAL</i>				
<i>ANDROGENS</i>		clomiphene	methylergonovine	calcium acetate (phosphate binder) cap	sodium polystyrene sulfonate RENVELA , Pak			
danazol fluoxymesterone testosterone cypionate PA testosterone enanthate PA	ANDROGEL PA, QL METHITEST TESTIM PA, QL TESTRED	<i>MEDICAL EQUIPMENT AND SUPPLIES</i>		<i>NUTRITIONAL SUPPLEMENTS</i>				
ANDRODERM PA, QL		<i>DIABETIC SUPPLIES</i>		<i>ELECTROLYTES</i>				
<i>ANTIDIABETICS</i>		Coverage of diabetic testing supplies includes, but is not limited to, the products listed below. Coverage may vary by plan		potassium bicarbonate, w/chloride effervescent tab	potassium chloride			
Biguanides		ACCU-CHEK® Active G*, QL		Test Strips by Roche				
metformin, ER		ACCU-CHEK® Aviva Plus G*, QL	ACCU-CHEK® SmartView G*, QL	ACCU-CHEK® Compact G*, QL				
<i>Insulins</i>		ACCU-CHEK® Comfort Curve G*, QL	ACCU-CHEK® Chemstrip®	ACCU-CHEK® Chemstrip®				
HUMALOG, cartridge, pen HUMALOG KWIKPEN HUMALOG, MIX vial G*	LANTUS, OPTICLIK, SOLOSTAR LEVERIM, FLEXPEN NOVOLIN via G*	Bayer BREEZE®2 G*, QL	Glucocard 01 QL	Lancets by Roche				
HUMULIN cartridge, pen (not conc.) G*	NOVOLIN FLEXPEN NOVLOG, MIX vial G*	Bayer CONTOUR® G*, QL	Glucocard vital QL	ACCU-CHEK® FastClix				
<i>Meglitinides</i>		NOVOFINE® (all)		ACCU-CHEK® Multiclix	ACCU-CHEK® Soft Touch			
PRANDIN	nateglinide	<i>Test Strips and Lancets by Bayer Health Care</i>		<i>VITAMINS</i>				
		Bayer BREEZE®2 G*, QL	MICROLET Lancets G*, QL	ergocaliferol cap	pediatric vitamins			
		Bayer CONTOUR® G*, QL		folic acid	ACD/FL, w/FE			
		<i>Test strips by Arkay</i>		pediatric multiple	prenatal vitamins/ folic acid 1 mg			
		glucocard 01 QL	glucocard vital QL					
		<i>Needles by Novo Nordisk</i>		<i>OPHTHALMIC AND OTIC AGENTS</i>				
		NOVOFINE® (all)		<i>OPHTHALMICS</i>				
		<i>Syringes by Abbott MediSense</i>		<i>Antihistamines</i>				
		PRECISION brand syringes G*		azelastine QL	PATADAY QL			
		<i>RESPIRATORY</i>		cromolyn	PATANOL QL			
		AEROCHAMBER, AEROCHAMBER w/mask		epinastine QL				
		<i>Miscellaneous Respiratory</i>		<i>Anti-infectives *QL</i>				
		epinephrine pen QL	TWINJECT QL	*QL: Agents in this category may be subject to Quantity Limits				
		EPIPEN QL, EPIPEN-JR QL		bacitracin	neo/poly/hc			
		<i>MISCELLANEOUS AGENTS</i>		bacitracin/neomycin/ polymyxin B ointment	ofloxacin			
				bacitracin/polymyxin B	sulfacetamide			
				betadine ophthalmic	tobramycin soln			
				ciprofloxacin soln	trifluridine			
				dexamethasone/ neomycin/polymyxin B	trimethoprim/polymyxin B			
					BLEPHAMIDE			
					neomycin/polymyxin B			
					MOXEZA			
					NATACYN			
					TOBRADEX			
					TOBREX oint			
					VIGAMOX			
					levofloxacin			

Anti-inflammatories		OTICS	ANTI-ASTHMATICS AND COPD (ORAL)		Sedating Antihistamine/ Decongestant Combinations	
bromfenac QL	ketorolac tromethamine QL	<i>Analgesics</i>		<i>Beta-agonists</i>		brompheniramine/ pseudoephedrine SR
dexamethasone	prednisolone	antipyrine/benzocaine, w/phenylephrine	chloroxylenol/pramoxine	albuterol	terbutaline	coldec DM
diclofenac QL	prednisolone phosphate			metaproterenol		dehistine
fluoromethalone	FML, FORTE					r-tanna
flurbiprofen QL	PRED MILD					riate
<i>Glaucoma</i>		<i>Anti-infectives</i>		<i>Leukotriene Blockers</i>		chlorpheniramine/ phenylephrine, w/ methscopolamine syrup
betaxolol	timolol, -XE soln	acetic acid	ofloxacin	montelukast	SINGULAIR ST	
carteolol	BETIMOL	hydrocortisone/ neomycin/polymyxin B (otic only)		zafirlukast		
levobunolol	BETOPTIC S					
metipranolol	ISTALOL					
latanoprost QL	TRAVATAN Z QL	RESPIRATORY AGENTS		<i>Xanthines</i>		
LUMIGAN QL		ANTI-ASTHMATICS AND COPD (INHALERS AND SOLUTIONS)		dyphylline/guaifenesin	THEO-24	
<i>Miscellaneous Glaucoma</i>		ipratropium soln , w/ albuterol	COMBIVENT (not RESPIMAT)	theophylline, SR tab		
acetazolamide	pilocarpine	ATROVENT HFA	SPIRIVA HANDIHALER QL			
apraclonidine	ALPHAGAN-P QL					
brimonidine tartate, 0.15%, 0.2% QL	0.1%, 0.15%					
dipivefrin	AZOPT					
dorzolamide , w/timolol	COMBIGAN QL					
methazolamide	PHOSPHOLINE IODIDE					
<i>Miscellaneous Ophthalmics</i>		<i>Beta-agonists</i>		<i>Nasal Anti-histamines</i>		
atropine	proparacaine	albuterol	SEREVENT DISKUS QL	azelastine QL	ASTEPRO QL	
cyclopentolate	tetracaine	FORADIL AEROLIZER QL	XOPENEX HFA QL			
homatropine	tropicamide	PROAIR HFA QL				
naphazoline						
phenylephrine						
<i>Corticosteroids and Anti-inflammatories</i>		<i>Corticosteroids and Anti-inflammatories</i>		<i>Non-sedating Anti-histamines</i>		
budesonide susp QL	FLOVENT DISKUS, HFA QL			alavert (Rx OTC Program)	levocetirizine	
cromolyn sodium soln QL	QVAR QL			cetirizine (Rx OTC Program)	loratadine (Rx OTC Program)	
ADVAIR DISKUS, HFA QL	SYMBICORT QL			desloratadine		
ASMANEX TWISTHALER QL						
<i>Nebulization Solution</i>		<i>Sedating Anti-histamines</i>		<i>INTRANASAL STEROIDS</i>		
sodium chloride soln		brompheniramine maleate SR 6 mg	cyproheptadine dextchlорpheniramine hydroxyzine hcl , pamoate promethazine	flunisolide	NASONEX QL	
		clemastine		fluticasone	VERAMYST QL	
		carbinoxamine maleate		triamcinolone QL		

My Notes



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2300 Main Street, Irvine, CA 92614

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